

Pregnant, Hot, and Bleeding

PBLD, TSA 2017, Nashville TN

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1) At 23:00, 19-year-old pregnant female, dropped off at ER by "a friend", with bright red vaginal bleeding. Patient is pale and diaphoretic, with a HR 140s, BP 149/98, SaO2 97%, and Temp is 37.9C. Patient is confused. Denies taking medication or doing drugs, has no prior surgical history, and denies any medical problems. She thinks she may have eaten lunch. Physical exam reveals a thin female, with bilateral breath sounds, rapid heart with possible S4 gallop. Patient appears to have a hard time opening her mouth, but denies any history of jaw problems. She has normal neck motion.

Thoughts? Differential diagnosis?

2) The OB team does a quick ultrasound of her abdomen and report that there is a large placental abruption. Patient had a couple of clinic visits, but otherwise no prenatal care. No historical labs are available, due to lack of prenatal care.

What do you want to do now?

3) The decision was made to go to the OR. Plan? GETA or SAB/EPID/CSE - let's talk about the options.

4) For GETA - what induction drugs? Choices: propofol, etomidate, ketamine, succinylcholine.

5) After induction, there was rapid delivery of small, pale, but viable infant. Uterus was exteriorized. Upon trying to place uterus back into abdominal cavity, OB asks for additional relaxation because "abdomen is rigid."

Don't all surgeons complain of needing more relaxation? Can a pregnant woman have muscle rigidity of the abdomen near term? Should you give muscle relaxant?

What else would you like to know?

6) HR 160's, ETCO2 is 38 with a rate of 12, SaO2 is 96%, and Temp is 38

Thoughts?

Differential diagnosis?

7) Plan of action: Is this related to the anesthetic, the meds, or some lab abnormality?

You send labs and you find: ABG: 7.28/42/96/14 BE -5 CPK 485 Urine myoglobin - pending

Discuss the blood gas versus the differential diagnosis. Likewise, discuss the CPK.

8) Dantrolene? Why or why not?

What was the final diagnosis?

Think about this case and its presentation, and come prepared to discuss possible diagnoses, treatment options, and lab findings. The result will be revealed to you at the end of the discussion.